LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

(Type or print clearly in black ink) See instructions at bottom of page

To Be Filed By: LOBBYISTS (Sec. 67-6619) - PM 1: 43

SECRETARY OF STATE STATE OF IDAHO

Page / of / Page(s)
THIS SPACE FOR OFFICE USE ONLY

	t's name and permanen		Date prepared /			Period covered			
DO. Box 196					3/1/05			month end	ding
PO	Box 196								
XIIA	VA, ID	(7/7/					(Mo.)	(Day)	(Yr.)
/wn	,10	0 26 29					2	28	05
Item 1	Totals of all re	eportable expenditures made or	incurred by Lobb	yist or by	Lobbyist's Empl	oyer on behalf o	of Lobbyi		
Cat	tegory of Expenditu	re			ibuted by each emp	loyer (Identify e r	nployers,	under	
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity * Total Amount for All Employers All Employers			Item 3, at bottom	tem 3, at bottom of page.)					
Do Not Have to be Reported		d All Employers	Employer No.	. 1 E	Employer No. 2	Employer N	Io. 3	Employe	er No. 4
Enterta Food a	inment nd Refreshment	s	\$	\$.		\$		\$	
Living	Accommodations			_					
Adverti	ising			_ _					
Travel			-	_					
Telepho	one			_					
Other E	Expenses or Services	5		_ _			<u> </u>		
	T	otal \$	\$	\\$		\$:	\$	
*/	When the number of en	nployers you are reporting for requ	lires multiple L-3 for	ms to be fil	ed a total amount fo	 or all employers sh	ould be en	ntered on Pa	ge 1.
Item		expenditure of more than fifty							
2	Date	Place	Ar	nount	Names	of Legislators & P	ublic Offic	ials in Grou	ıp
No	NE				ļ				
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□ (Continued on attached	page(s)	· ·		'				
		INSTRUCTIONS		1tem	Er	mployer(s) Name(s) and Add	ress(es)	
		Histricettons			7°		۵		./
	o should file this fo 6617 Idaho Code.	orm: Any lobbyist registered t	inder Section	No.1	IDANO LI 1330 Sc.	CENSED IPTH AVE	109 VE 23 2	RAGE	7/55cc
						, ,			
	ng deadline: Mont th for activities of t	thly reports due within ten (10 he past month.)) days of the	No.2					
то	BE FILED WITH:								
		Ben Ysursa		No.3					
Secretary of State									
	1	PO Box 83720 Boise, ID 83720-0080		No.4					
		3) 334-2852 Fax: (208) 334-2	282						

Item 4	I nemanal property to any Legislator, or for or on hehalf of any legislator										
	Date	Amount		Name of Legislator Receiving or Benefited							
4	Date Subject matter or House Bill, the Lobbyist v Code Bill, R Legisla	Amount Of proposed legisla	tion, the number of the Senate regislative activity in which poposing. Appropriation Bill Number	any leg	islator.	or Bene	IDENTIFICATION Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper,				
			above is a true, complete and			31	power, CATV, gas Other (please specify)				

MAUG MAIX 3/1/05
Lobbyist signature Date